**附件3**

**2026年度浙江省应用基础研究计划“新苗”项目****学院推荐申报汇总表**

| **排序（指标名额内）** | **学院/学科/平台名称** | **项目名称** | **项目负责人** | **学号** | **电话** | **项目负责人培养类型** | **项目起止年月** | **举荐导师** | **职称（职务）** | **电话** | **配套经费（万元）** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1 |  |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |  |  |  |